

DELAWARE MANUFACTURED HOUSING RELOCATION AUTHORITY

TENANT APPLICATION FOR RELOCATION BENEFITS

I hereby request assistance from the Delaware Manufactured Home Relocation Trust Fund as set forth in 25 Del. C. §7012. By signing this form, I certify that I am a tenant as defined in 25 Del. C. §7003 (u) and that I have paid my share of the total Trust Fund assessment during the course of my tenancy. I understand that it is a class A misdemeanor for a tenant or a tenant's agent to file any notice, statement, or other document required hereunder which is false or contains a material misstatement of fact.

TENANTS NAME: _____
PLEASE PRINT

SOCIAL SECURITY NUMBER: _____

PARK NAME: _____

ADDRESS WHERE HOME IS LOCATED: _____

CITY/STATE/ZIP CODE: _____

Mailing address if different than above:

STREET/PO BOX: _____

CITY/STATE/ZIP CODE: _____

PHONE NUMBER: _____

ALTERNATE PHONE NUMBER: _____

SINGLE UNIT _____ DOUBLE UNIT _____ YEAR _____

UNIT SIZE _____ MANUFACTURER _____

SERIAL NUMBER OF HOME: _____

TITLE HELD BY: _____

PARK WHERE HOME WILL BE RELOCATED TO: _____

NEW MAILING ADDRESS: _____
(Address of home in new park)

TYPE OF BENEFITS APPLIED FOR: (Check ONE and amount requested)

- A. Relocation Expenses of Moving Home _____ \$ _____
- B. Abandonment Payment _____ \$ _____
- C. Non-Relocatable Home Payment _____ \$ _____

Signature of Tenant

Date

Please attach: (a) a copy of your title or a notarized document showing ownership; (b) a copy of the notice of termination or non-renewal of your rental agreement due to a change of use in land; (c) if you are seeking relocation expenses, you must submit a copy of your contract with a licensed moving or towing contractor for the moving expenses of your home; (d) if you believe that your home is non-relocatable, provide a brief description of the reason for your belief. (If the Authority determines that your home is in fact non-relocatable, you must obtain at your expense, an appraisal prepared by a certified manufactured home appraiser. A list of qualified appraisers may be obtained by contacting the Authority). If you elect to abandon your home, please note so above. Under the Act, the maximum benefit payable to a Tenant who elects to abandon his or her home is \$1,500.00 for a single section home and \$2,500.00 for a multi-section home.

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH REQUIRED DOCUMENTS TO:

**Delaware Manufactured Housing Relocation Authority
PO Box 370
Camden, Delaware 19934**

(302) 674-7768